

NETWORK FOR HEALTH IN ARMENIA
SUPPLEMENTAL REPORT FOR THREE PARTNER ORGANIZATIONS

ADRA, CARE, and Save the Children

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ACRONYMS

ADHS	-	Armenia Demographic Health Survey
ADRA	-	Adventist Development and Relief Agency International
CARE	-	Cooperative for Assistance and Relief Everywhere
HIV/AIDS	-	Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome
IUD	-	Intrauterine Device
LQAS	-	Lot Quality Assurance Sampling
NGO	-	Non-Governmental Organization
PVO	-	Private Voluntary Organization
TAR	-	Total Abortion Rate
UNICEF	-	United Nations Children's Fund
USAID	-	United States Agency for International Development
WHO	-	World Health Organization

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INTRODUCTION

The USAID-funded Network for Health project in Armenia is designed to increase access to quality reproductive health and family planning information and services through a coordinated effort of three private voluntary organizations (PVOs), local non-governmental organizations, government agencies, and others. The project's goal is to reduce mortality and morbidity resulting from preventable reproductive health conditions by increasing access to high quality care and improved reproductive health and family planning information and services.

This supplementary report is intended to enhance understanding of key reproductive health indicators relevant to program strategy formulation. The report complements and supplements the quantitative baseline report disseminated in March 2001 (Valadez et al. 2001), which included a comprehensive description of the survey methodology and findings from three project pilot sites in Gavar, Goris, and Gyumri. In particular, this report:

- Highlights the current status of key family planning, safe motherhood, post-abortion, and breastfeeding indicators. In addition, it supplements the original baseline survey with other quantitative and qualitative data from Networks for Health and other organizations working in Armenia (e.g., Salvador and Danielian 1999; ADHS 2001; Thompson et al. 2001).
- Presents the coverage proportions for these key indicators with confidence intervals, as well as indicators that were too complex to calculate with hand tabulations (e.g., the proportions who breastfed exclusively)—the method used in the March 2001 report.
- Compares hand-tabulated results with the recently developed computer database and documents the difference. If the differences are negligible then considerable time could be saved in the future by relying on the hand-tabulated results. This technical section, presented as Appendix 1, shows a 3 percent average difference between the two types of data.

A. Methodology

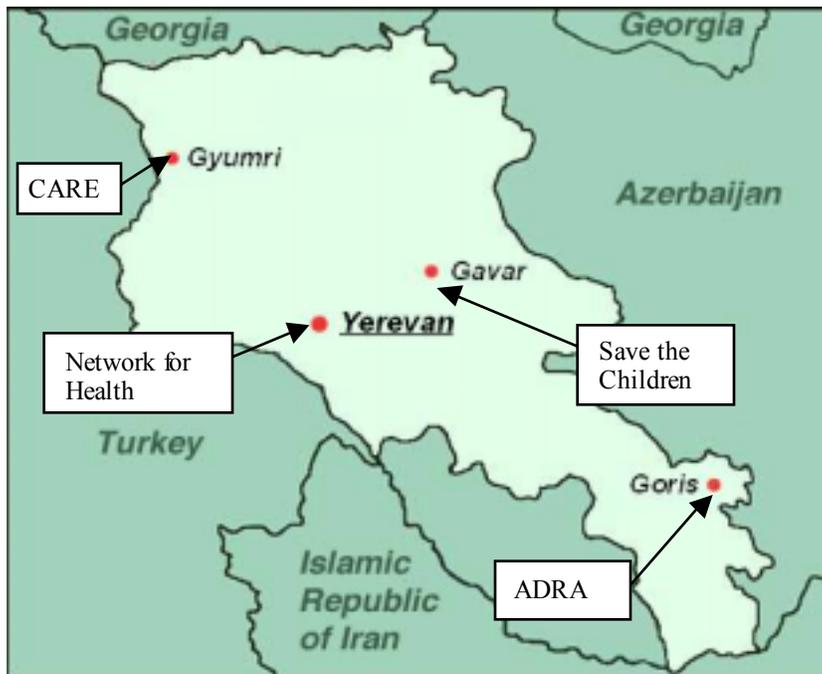
Quantitative Methodology

The following subsection specifies the geographic locations of the three PVO pilot sites (Figure 1) and the sampling criteria to provide sufficient contextual information to interpret this report. An in-depth discussion of the methodology is contained in the March 2001 baseline report.

The project monitoring and evaluation (M&E) system aided the PVO partners in developing local supervision systems at each pilot site based on the principles of Lot Quality Assurance Sampling (LQAS). Each PVO's catchment area was divided into administratively meaningful supervision areas. The number of supervision areas in each pilot site is as follows: Save the Children (5), CARE (4), and ADRA (5). Baseline data pertain to each supervision area.

The data gathered from each supervision area, when aggregated for an individual PVO site or for the network of PVOs as a whole, are equivalent to a stratified random sample and create a coverage proportion and confidence interval (See Appendix 2 for a summary of coverage proportions for key indicators with confidence intervals).

Figure 1. Geographic Locations of the Network for Health Pilot Sites



Complementary Qualitative Information

The qualitative data presented in this report have been selected to provide insights into Armenian family planning preferences, primarily using community voices and perspectives. The sources are as follows:

- Qualitative research reports from Network for Health partners in Gavar, Gyumri, and Goris (ADRA 2001b; CARE 2001b; and Save the Children 2001a);
- Qualitative research report from the American University of Armenia focusing on the Johns Hopkins University Population Communication Services information, education, and communication campaign development (Salvador and Danielian 1999), and
- Qualitative research report from the American University of Armenia focusing on the standard days method of natural family planning (Gavar) (Thompson et al. 2001).

The two qualitative reports from the American University of Armenia are cited throughout this document because they contain more quotations and specific perspectives regarding family planning than the qualitative reports from the Network for Health. In general, the underlying issues pertinent to understanding family planning use in Armenia are similar across the reports, even though they were collected from different geographic areas throughout the country. Finally, the quotations included in this report are meant to complement the quantitative information and are not meant to provide a comprehensive understanding of the issues nor to represent a majority perspective.

RESULTS AND DISCUSSION

The results in this section are computer analyses of responses to questions for selected indicators asked of three different categories of respondents: non-pregnant women ages 15-49, men ages 15-54, and mothers of children ages 0-11 months. For the purpose of brevity, we refer to these three categories as: women, men, and mothers.

The results are presented for Network for Health as a whole, aggregating the results from the three pilot sites. Each PVO has already written an individual report summarizing results pertinent to its own site (ADRA, Goris 2001; CARE, Gyumri 2001; Save the Children, Gavar 2001). We have only reported important variations by site in this document; otherwise, this analysis is presented for the Network for Health as a whole. Please note that these computer analyses are weighted by the population in each pilot site. Thus, the results will be only slightly different from those presented in the March 2001 report. (See Appendices 1 and 2 for more information).

A. Family Planning

Reproductive health questions were asked of men, women, and mothers. The results are described in the following text and are summarized in Table 1.

Indicator	Pilot Areas			Average
	Goris	Gyumri	Gavar	
Abortions				
% women reporting induced abortion in lifetime	48%	40%	43%	44%
Total Abortion Rate	1.40	1.85	2.52	2.03
Contraceptive Method Use				
% mothers given information about family planning after delivery	12%	25%	24%	21%
% women who report currently using a family planning method (CPR)	61%	43%	29%	42%
% women who report using a modern family planning method	17%	45%	24%	26%
Post-Abortion Family Planning				
% women informed about family planning methods after abortion	29%	45%	39%	37%
% women informed about modern family planning methods after abortion	29%	31%	34%	32%

Abortion Rates and Post-Abortion Care

Forty-four percent of women reported having had an induced abortion sometime in their lifetime, with a total abortion rate (TAR)¹ abortion rate of 2.0 abortions per woman. The Armenia Demographic and Health Survey (ADHS 2001) reported a higher TAR of 2.6, which may be explained by the fact that

¹ The 2000 Armenia Demographic and Health Survey included a question concerning *self-induced* abortions. The decision was based on the finding that some respondents interpreted an *induced abortion* to mean abortions taking place in a health facility, while *self-induced* abortions meant those taking place outside of a health facility.

approximately 60 percent of the ADHS sampling was done in urban areas, while the Network for Health sites were in smaller cities and did not include Yerevan. The abortion rate varied across the three sites; Goris had a TAR of 1.4 abortions per woman, Gavar's TAR was 2.5, and Gyumri's was about 1.9. The need for improved dissemination of contraceptive methods and information is underscored by the ADHS results, which showed that on average, an Armenian woman will have about 50 percent more abortions than births (1.7 TAR). Illustrative quotations in Box 1 suggest why some women in Armenia have abortions.

Box 1: Why Armenian Women Choose Abortion

Network for Health qualitative research focusing on women who had had abortions revealed that the primary reasons for their decisions included socioeconomic conditions and postponing or stopping childbearing. Other qualitative research in Armenia points to the following factors that may also influence a woman and her family's decision to have an abortion:

Effectiveness

"I used pills and was displeased with them. I used calendar, and it did not work. What else could I do (abortion)?" (Female)*

"There is nothing better than abortions. You clean your uterus and it is okay." (Female)*

Insufficient Information to Choose Modern Contraceptive Methods

"... However, I should say that mostly abortion is used as a family planning method. Those who are unaware of methods send their wives to abortion. Those who have even a little understanding use condoms and other methods." (Physician)*

"There is a large choice (of contraceptive methods) now. ... Sometimes we avoid them because we don't know which is better." (Female)**

No Confidence in Modern Contraceptive Methods

"Contraceptives are available, but people mistrust them." (Nurse)*

Side Effects of Modern Contraceptive Methods

"Those methods cause side effects and women get health problems. ... It is better to go for abortions than use these contraceptive methods." (Female)*

"If the gynecologist is a good specialist, the abortion is safer." (Female)*

"Those who use contraceptives, they want to avoid side effects. And Pharmatex (spermicide) has almost none, that is why demand is high." (Pharmacist)**

Availability

"People are not able to get to Gavar in order to take condoms. They want to use condoms to avoid abortions, but reaching Gavar is a problem." (Nurse)*

Lack of Male Motivation to Use Condoms

"Well, you don't have to use condoms inside the family. It is okay if you have another baby. But if it is outside of the family, you can get hundreds of illnesses." (Male)**

"There are men who care for women's health (by using condoms). There are men who don't care for it." (Female)*

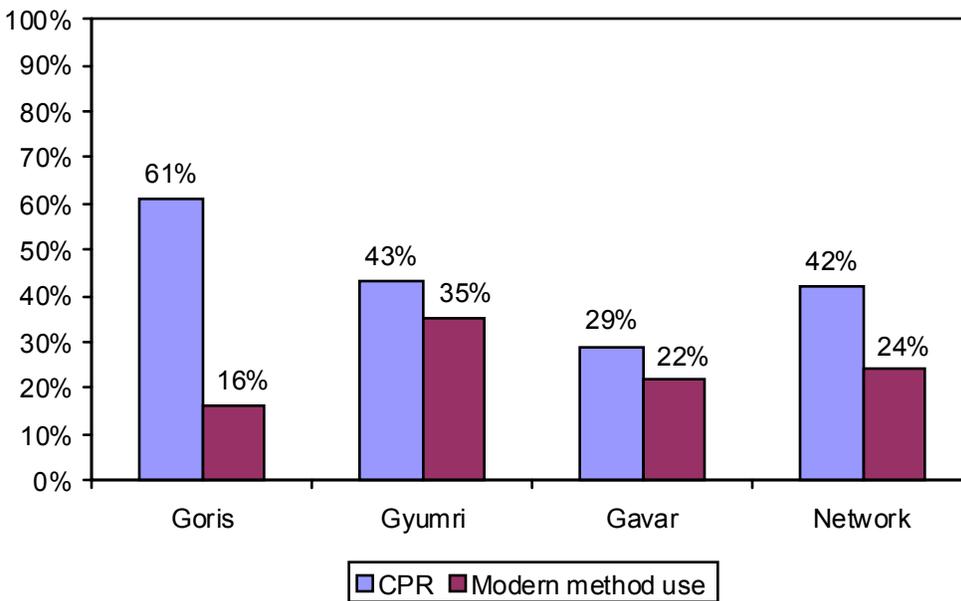
* (Thompson et al. 2001) ** (Salvador and Danielian 1999)

Contraceptive Method Use

The contraceptive prevalence rate (CPR)² was found to be 42 percent. This is similar to the ADHS (ADHS 2001), which found that 39 percent of women currently use a contraceptive method. Goris had the highest CPR (61%), and Gavar the lowest (29%), while the CPR in Gyumri was 43 percent (Figure 2).

There was interesting variation among the sites with regard to modern method use. For example, Goris, the site with the highest CPR, has the smallest proportion of women using modern contraceptive methods (16%), indicating that most women prefer natural methods. In contrast, in Gavar, where the CPR was the lowest (29%), 75 percent of women who use any family planning method use a modern method.³ Gyumri had the highest modern contraceptive use rate (35%); this is interesting given that it had the second highest CPR among the three sites.

Figure 2. Percentage of Women Who Report Using Family Planning Methods and Modern Methods in the Three Pilot Sites and Network for Health as a Whole



Computer analysis shows that the largest percentage of women who reported using a modern method use condoms (12%), followed by IUDs (7%). These results differ from the ADHS, which found that withdrawal (32%) was the most frequently used method; Network for Health found that only 11 percent of women using this method. This may be explained by the difference in sampling frames; 40 percent of the DHS sample was rural while the Network for Health survey was conducted in three cities. Box 2 presents some negative opinions of women and men about three modern contraceptive methods.

² CPR is generally defined as the percentage of women of reproductive age (ages 15-49) using any contraceptive method.

³ Hand tabulation showed that in Gavar, 38 percent of women reported using modern contraceptives. The unweighted computer analysis shows that only 25 percent used modern contraceptives. This discrepancy may be due to a design feature of the tabulation tables. The Gavar team coded for women who use “any method” while other teams coded for use of “modern methods.” This would explain why the hand tabulation result for modern contraceptive use in Gavar is higher than the computer result.

Box 2: Selected Community Perspectives on Modern Contraceptive Use

In focus groups conducted in urban and rural areas, men and women revealed strong negative opinions about modern contraceptives.* Their lack of confidence in modern contraceptives is based on misinformation and on their perceptions of side effects, effectiveness, convenience, and quality.

Oral Contraceptives

- Don't trust
- Need to remember to take every day
- Pills and chemicals cannot be safe
- All drugs have negative side effects
- No guarantee that they are harmless
- Can cause hormonal abnormalities
- Hormones can be harmful for the skin
- Harmful and can cause extra hair growth
- Can be dangerous for the kidneys
- Make women feel sick, have headaches, have pains
- Expensive

IUDs

- Don't trust, didn't work
- Not useful
- Dangerous
- Risk to health is high
- Some women fear them
- Harmful, but better than pills
- Can cause men to bleed
- Cause inflammation and cysts
- Some women's "organisms" reject them
- Can cause pregnancy outside of uterus

Condoms

- Men hesitate to use them
- Culture of using them does not exist
- Inconvenient to use, have to remember to use
- Husband does not get pleasure
- Same as smelling a flower with a gas mask on
- Sometimes expensive or of bad quality
- Can break
- Not effective
- Must use only with other methods
- Should use something else in family
- Not in family; how to throw it away without teenage child seeing it?
- No need if one is careful and withdraws
- Can affect health
- Cause rheumatism because made of rubber

* (Salvador and Danielian 1999)

Post-Abortion and Postpartum Family Planning Counseling

Further analysis of women who had had at least one induced abortion in their lifetime revealed that only 37 percent had received any information concerning family planning methods after their abortion. A similar percentage (32%) reported that they were counseled to use modern methods after the abortion, suggesting that if a woman receives post-abortion counseling, she is likely to be informed about modern methods during the visit. At the time of the survey, 33 percent of women who had received post-abortion counseling were using a modern family planning method.

The above-mentioned results have a denominator of *all women who report having had an induced abortion in her lifetime*. This analysis complements the March 2001 baseline report, as the denominator used in that report was *all women who had an induced abortion in the past 12 months*.

Postpartum experiences were also examined to determine whether mothers received family planning information. During postpartum care, 21 percent of mothers reported being counseled about family planning.⁴ Box 3 presents the results of other research conducted by Network for Health, which also highlighted deficiencies in the extent and quality of family planning counseling and services. Box 4 presents perspectives regarding family planning counseling, mainly from health care providers.

Box 3: Selected Evidence Concerning Family Planning Counseling and Services

Qualitative research by the Network for Health focusing on case histories of women who had obtained an abortion confirmed that counseling for family planning was insufficient.* Some women were not counseled on modern contraceptive methods after their abortion and few had any knowledge of modern contraceptives.

Health facility assessments conducted by the Network for Health in Gavar, Gyumri, and Goris (Network for Health in Armenia 2000) revealed some deficiencies in the provision of quality family planning information and services during the antenatal and postpartum periods. The need to improve the quality of family planning services was suggested by the following observations:

- Few women were counseled on family planning during the postpartum period. In one region, postpartum counseling on family planning was rare unless women requested it.
- In one region, a physician stated that there was little time for health education.
- Print materials focusing on family planning were not always used with or provided to clients.
- Expired contraceptives were found in some facilities.

*ADRA (2001b); CARE (2001b); Save the Children (2001a).

⁴ In Gyumri, the results presented for this indicator from the unweighted hand tabulation (16%) differ from those in the unweighted computer analysis (23%). This variation may be a consequence of error in coding “correct responses” during the hand tabulation.

Box 4: Selected Perspectives on Family Planning Counseling

Service providers play an important role in influencing the decision to use modern contraceptive methods in Armenia. According to one qualitative study, both women and men stated that providers were one of their preferred sources of information for family planning.** While some qualitative research suggests provider and client satisfaction with family planning counseling, it remains unclear to what extent certain service providers engage in sufficient counseling to allay women's fears regarding modern contraceptives and to ensure that they feel empowered to make informed choices to use modern contraceptives. Some perspectives on family planning counseling are provided below:

“I tell them (pregnant women) to come back and we'll discuss family planning issues and contraceptive methods she might use. Because nowadays, young girls 20-25 have no idea what to use or what to do. And, of course when they come here after the delivery we give them condoms for the first month. ...And of course we discuss these issues with gynecological patients because their level of education is not high enough for them to decide themselves and so they always need doctors' advice.” (Physician)**

“I think that it depends on how the doctor explains things. I am sure of it. I always achieve good results by talking to my patients and explaining all methods.” (Physician)**

“I like talking to patients very much. Some patients are active, some are passive and they don't ask many questions. The active ones discuss social problems, sexual life, and ways of preventing pregnancy. Usually they ask what they should be doing to avoid tumors and cancer. I satisfy their interests as much as I can.” (Physician)**

“I recommend only what we have. As I said, depending on the women's health, we suggest different things. We look at contraindications. I suggest IUDs, hormonal methods, or condoms.” (Physician)**

Qualitative research also highlights some provider practices or attitudes that could be improved in order to better meet their clients' needs.

“There are cases when doctors avoid giving advice, but nurses never do that.” (Female)*

“They are not informed. They don't even know their blood types after delivering twice. It also depends on our work. Sometimes they are not interested in anything.” (Physician)**

* (Thompson et al. 2001) ** (Salvador and Danielian 1999)

B. Safe Motherhood

This section presents responses to questions concerning antenatal care, delivery, postpartum care, maternal nutrition, and newborn care. Depending on the question, women, men, and mothers were sampled in the pilot sites as respondents. Mothers were asked *behavioral* questions, while women and men were asked *knowledge* questions; Table 2 summarizes the results.

Indicator	Pilot Areas			Average
	Goris	Gyumri	Gavar	
% mothers having at least one antenatal visit by clinically trained provider	95%	67%	77%	80%
% mothers who had first antenatal visit during first trimester of pregnancy	45%	26%	32%	34%
% women knowing two or more danger signs during pregnancy	64%	44%	72%	63%
% men knowing two or more danger signs during pregnancy	33%	30%	55%	42%
% mothers receiving iron supplements during pregnancy	6%	17%	12%	12%
% women knowing two or more danger signs during labor/delivery	47%	43%	74%	58%
% men knowing two or more danger signs during labor/delivery	29%	33%	44%	37%
% women knowing two or more postpartum danger signs	69%	46%	79%	68%
% men knowing two or more postpartum danger signs	37%	41%	49%	44%
% women knowing two or more of all danger signs in each stage	37%	31%	58%	45%
% men knowing two or more of all danger signs in each stage	14%	16%	33%	23%

Antenatal Care

Mothers were questioned to assess their behavior with their most recent infant. Eighty percent of all mothers in the pilot sites said they had received at least one antenatal care visit by a clinically trained provider (gynecologist, doctor, registered nurse, or midwife). The ADHS found a slightly higher percentage (92%) for this indicator.

There was variation among the sites. Gyumri was lower (67%) than Gavar (77%) or Goris (95%). The ADHS data also suggest regional variation, as 69 percent of women in Gegharkunik—which includes rural areas surrounding Gavar—received antenatal care from health professionals. Only 34 percent of all mothers interviewed had their first antenatal visit during the first trimester of their most recent pregnancy. The variation in this indicator was similar to that described above (Goris: 45%; Gyumri: 26%; Gavar: 32%).

Questions about antenatal danger signs were asked of both women and men. Only 63 percent of women and 42 percent of men knew two or more danger signs during pregnancy. Gyumri and Goris exhibited the lowest knowledge levels for both men and women (women: 44% and 64%, respectively; men: 30% and 33%, respectively).

Few mothers (12%) reported that they received iron during their most recent pregnancy. While Goris exhibited the lowest coverage (6%), few mothers received iron supplements in the other areas either (Gyumri: 17%; Gavar: 12%). These findings may raise concern for the nutritional status of mothers. However, the ADHS found that only 13 percent of women actually suffer from mild, moderate, or severe anemia.

Danger Signs During Delivery

Fifty-eight percent of women knew at least two danger signs during delivery. Gavar exhibited the highest proportion of knowledgeable women (74%) while Gyumri (43%) and Goris (47%) had lower levels. Men appear to be substantially less knowledgeable than women about danger signs during delivery; only 37 percent knew at least two danger signs, with the variation among pilot sites quite similar to the variation among women.

Danger Signs During the Postpartum Period

Sixty-eight percent of women knew two or more postpartum danger signs; the highest proportion of knowledgeable women was in Gavar (79%) followed by Goris (69%) and Gyumri (46%). Only 44 percent of men knew two or more postpartum danger signs, with little variation among the sites.

Summary of Knowledge of Maternal Complications

Overall knowledge of maternal complications (knowing two or more danger signs during each of three stages: pregnancy, delivery, and postpartum period) was low among both women (45%) and men (23%). Gavar is the only exception; 58 percent of the women knew two more danger signs during each of the three stages.

C. Newborn Care

Women and men were asked about their knowledge of newborn care; Table 3 summarizes the results. Seventy percent of women knew two or more danger signs in a newborn within the first seven days of birth; the proportion in Gyumri was lower (52%) than in Goris (72%) and Gavar (78%).

Indicator	Pilot Areas			Average
	Goris	Gyumri	Gavar	
% women knowing two or more danger signs in newborn within first seven days of birth	72%	52%	78%	70%
% men knowing two or more danger signs in newborn within first seven days of birth	55%	42%	52%	50%

Among men, 50 percent knew two or more danger signs in a newborn in the first seven days of birth. The pattern of variation is similar to that for women, with Gyumri having the lowest level of knowledge among men (42%) and Gavar and Goris having higher levels (52% and 55%, respectively).

Breastfeeding and Complementary Feeding

Mothers were asked questions to determine when they initiated breastfeeding and to learn more about their breastfeeding behavior (Table 4). The analyses use subsamples of mothers depending on the specific indicator. For example, the assessment of *exclusive breastfeeding* included mothers of children

ages 0-3 months and children ages 0-5 months,⁵ while the assessment of *complementary feeding* practices included mothers of children ages 6-9 months. This more complex analysis was not calculated in the March 2001 report using the hand tabulation method.

Indicator	Pilot Areas			Average
	Goris	Gyumri	Gavar	
% newborns beginning breastfeeding within one hour of birth	3%	31%	41%	28%
% babies placed with mother immediately after cutting the umbilical cord	18%	42%	31%	30%
% mothers with babies ages 0-5 months exclusively breastfeeding	22%	24%	22%	23%

Twenty-eight percent of mothers began breastfeeding newborns within one hour after birth; this ranged from 3 percent in Goris to 41 percent in Gavar. Gyumri, at 31 percent, was about average.⁶ The aggregate Network for Health measure of breastfeeding within the first hour of life may be low because most babies are separated from their mother immediately after delivery. Only 30 percent of the mothers reported that their babies were given to them immediately after the umbilical cord was cut.

Overall, 23 percent of mothers with children ages 0-5 months reported that they were exclusively breastfeeding at the time of the interview. Among mothers with children ages 0-3 months, 34 percent reported they were exclusively breastfeeding. For both age groups, the proportions for each site are similar.

A trend analysis of exclusive breastfeeding indicates a rapid decline in the practice by the second month of life (Figure 3). Approximately 66 percent of mothers reported they were exclusively breastfeeding their 0-1 month-old babies. However, in the second and third months of life, only 43 percent and 22 percent of mothers, respectively, breastfed their babies exclusively. At the fourth month of life, only 8 percent of mothers were breastfeeding exclusively, and after the fourth month, no mothers reported they exclusively breastfed their babies.⁷ The United Nations Children’s Fund (UNICEF) suggests that mothers begin premature supplementation because they believe they have insufficient breastmilk—based on the belief that an infant’s desire to breastfeed “more than normal” results in a lack of milk (UNICEF et al. 1998). The majority of mothers (85%) of children ages 6-9 months reported that they were giving complementary foods to their babies. More than 90 percent of mothers in Goris and Gavar were giving foods to their 6-9 month-old babies, but in Gyumri, only 74 percent of mothers reported giving foods. The percentage of women feeding complementary foods to their babies is consistently high for each month of age. In looking at the trends for complementary feeding, 74 percent of the mothers were doing so at six months and 84 percent by nine months. When the category is divided into two classifications, liquids and solids, and all mothers with children ages 0-11 months are included, the

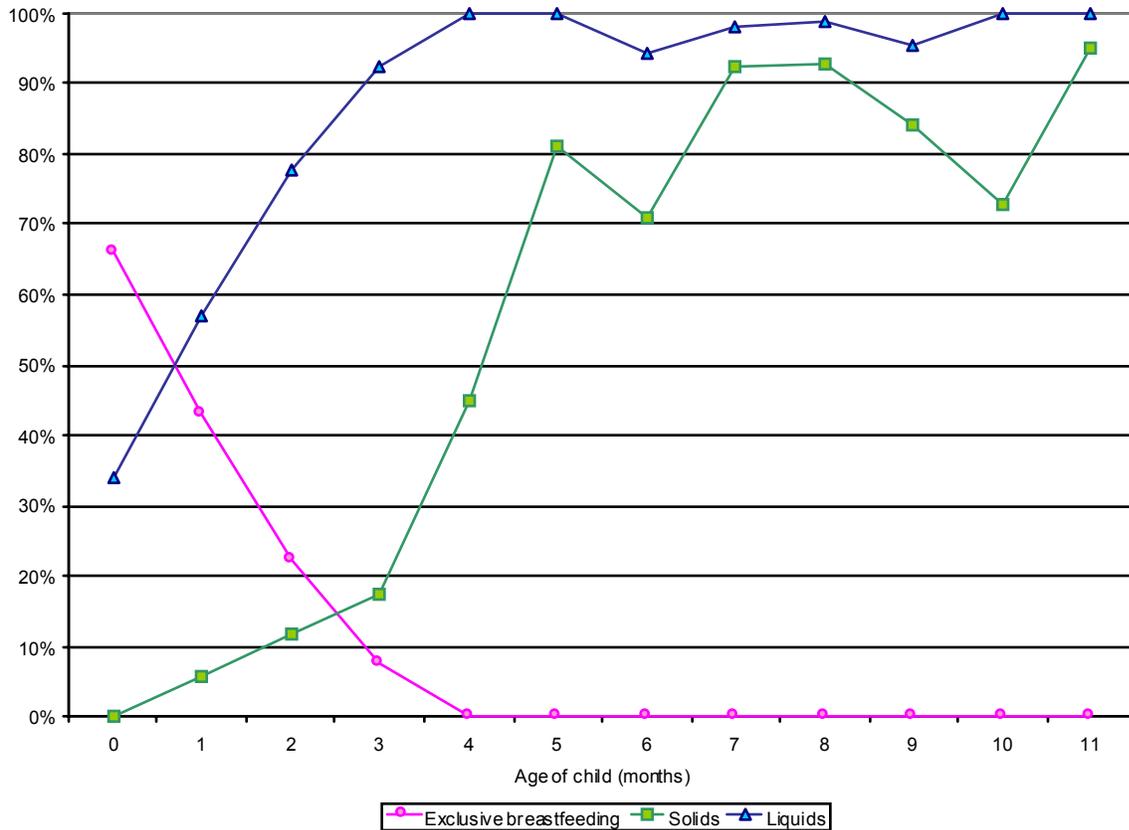
⁵ Exclusive breastfeeding is recommended during the first four to six months of a child’s life because it limits exposure to disease agents and provides all the nutrients a baby requires. The Ministry of Health in Armenia supports exclusive breastfeeding for the first four months, and the World Health Organization recommends it for the first six months. This report presents both results.

⁶ In Gyumri, the unweighted hand tabulation result for this indicator (20%) was different from the unweighted computer result (29%). This difference resulted from incorrect coding of the responses on the questionnaires in one supervision area. A response was correct if the mother responded that she “immediately” began breastfeeding (response=1), or began within “one hour” (response = number of hours <=1). In Gyumri (supervision area 4), only the “immediate” responses were counted, omitting four correct responses.

⁷ UNICEF (1998) found that only 4 percent of children between ages 4-5 months are exclusively breastfed compared to 34 percent of children between ages 2-3 months.

earliest significant (and premature) introduction of solids occurs during the third month (18%), while 34 percent of mothers began giving their infants liquids during the first month of life. In general, mothers tended to give liquids earlier than solids until the fifth month, when both were given in similarly high amounts (liquids 100%, solids 81%) (Figure 3). The tendency to introduce both liquids and solids at an early age and the consequent rapid decline in exclusive breastfeeding is a potential area for further programmatic efforts.

Figure 3. Infant Feeding in a Cohort of Infants Ages 0-11 Months



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APPENDIX I: Comparison of Hand-Tabulated and Computer-Generated Results

One purpose of this report is to present computer calculated *weighted* coverage proportions with confidence intervals for key post-abortion, family planning, safe motherhood, newborn care, and infant nutrition indicators (See Appendix 2). These calculations are *weighted* by the population size of each supervision area. This is done so as not to under-emphasize the more populous areas or over-emphasize the smaller areas. Hand tabulations, as presented in the original baseline report, were *unweighted* to prevent the field staff from having to make complex calculations by hand. The difference, however, between *weighted* and *unweighted* data is small and insignificant for programmatic planning. The *weighted* values for each key indicator are presented in the results section of this document.

Another purpose of this report is to compare the results of the initial baseline report with the computer analysis and to document the difference. We compared 15 key indicators for each of the three PVOs, resulting in 45 individual measures of error. In order to make a valid comparison between the two analyses, *unweighted* computer results are compared with *unweighted* hand-tabulated results. The *weighted* computer results are mathematically different from the *unweighted* hand-tabulated results, and, therefore, are not useful for measuring error.

Error is calculated by subtracting the *unweighted* computer-generated estimate from the hand-tabulated estimate. The absolute values of these 45 error calculations are then averaged to measure the *total error*. The total error produced by using hand tabulations is 3 percent on average, which is negligible and therefore acceptable. It further suggests that hand tabulations can be used in lieu of computer analysis with minimal resulting error.

We then looked at each of the 45 individual error calculations and used a 5 percent rule to determine unacceptable error from acceptable error; if the individual error value was 5 percent or higher, it was unacceptable. For these indicators, we then tried to understand the reason for the error. These cases are discussed in footnotes in the results section.

APPENDIX 2: Coverage Proportions and Confidence Intervals for Key Indicators

Post-Abortion and Contraceptive Methods

Percentage of women who report currently using a family planning method (CPR)			
PVO	n	Estimate	95% c.i. (+/-)
ADRA	95	0.61	10%
CARE	76	0.43	11%
SAVE	95	0.29	9%
Network	266	0.42	6%

Percentage of women who report currently using a modern family planning method			
PVO	n	Estimate	95% c.i. (+/-)
ADRA	95	0.16	7%
CARE	76	0.35	11%
SAVE	95	0.22	8%
Network	266	0.24	5%

Percentage of women reporting induced abortion in their lifetime			
PVO	n	Estimate	95% c.i. (+/-)
ADRA	90	0.48	11%
CARE	62	0.40	13%
SAVE	91	0.43	10%
Network	243	0.44	6%

Percentage of women informed about family planning methods post-abortion			
PVO	n	Estimate	95% c.i. (+/-)
Network	113	0.37	9%

Percentage of women informed about modern family planning methods post-abortion			
PVO	n	Estimate	95% c.i. (+/-)
Network	113	0.32	9%

Percentage of mothers informed about family planning methods after delivery			
PVO	n	Estimate	95% c.i. (+/-)
ADRA	94	0.12	7%
CARE	75	0.25	10%
SAVE	95	0.24	9%
Network	264	0.21	5%

Safe Motherhood

Percentage of mothers reporting having at least one antenatal visit by clinically trained provider

PVO	n	Estimate	95% c.i. (+/-)
ADRA	94	0.95	5%
CARE	75	0.67	11%
SAVE	95	0.77	9%
Network	264	0.80	5%

Percentage of mothers reporting first antenatal visit during first trimester

PVO	n	Estimate	95% c.i. (+/-)
ADRA	94	0.45	10%
CARE	75	0.26	10%
SAVE	95	0.32	10%
Network	264	0.34	6%

Percentage of women who know two or more danger signs during pregnancy

PVO	n	Estimate	95% c.i. (+/-)
ADRA	95	0.64	10%
CARE	76	0.44	11%
SAVE	95	0.72	9%
Network	266	0.63	6%

Percentage of mothers receiving iron supplements during pregnancy

PVO	n	Estimate	95% c.i. (+/-)
ADRA	93	0.06	5%
CARE	75	0.17	9%
SAVE	95	0.12	7%
Network	263	0.12	4%

Percentage of men who know two or more danger signs during pregnancy

PVO	n	Estimate	95% c.i. (+/-)
ADRA	95	0.33	10%
CARE	76	0.30	11%
SAVE	95	0.55	10%
Network	266	0.42	6%

Percentage of women who know two or more danger signs during delivery			
PVO	n	Estimate	95% c.i. (+/-)
ADRA	95	0.47	10%
CARE	76	0.43	11%
SAVE	95	0.74	9%
Network	266	0.58	6%

Percentage of men who know two or more danger signs during delivery			
PVO	n	Estimate	95% c.i. (+/-)
ADRA	95	0.29	9%
CARE	76	0.33	11%
SAVE	95	0.44	10%
Network	266	0.37	6%

Percentage of women who know two or more danger signs post-partum			
PVO	n	Estimate	95% c.i. (+/-)
ADRA	95	0.69	9%
CARE	76	0.46	11%
SAVE	95	0.79	8%
Network	266	0.68	6%

Percentage of men who know two or more danger signs post-partum			
PVO	n	Estimate	95% c.i. (+/-)
ADRA	95	0.37	10%
CARE	76	0.41	11%
SAVE	95	0.49	10%
Network	266	0.44	6%

Percentage of women who know two or more maternal complications			
PVO	n	Estimate	95% c.i. (+/-)
ADRA	95	0.37	10%
CARE	76	0.31	11%
SAVE	95	0.58	10%
Network	266	0.45	6%

Percentage of men who know two or more maternal complications			
PVO	n	Estimate	95% c.i. (+/-)
ADRA	95	0.14	7%
CARE	76	0.16	8%
SAVE	95	0.33	10%
Network	266	0.23	5%

Newborn Care and Breastfeeding

Percentage of women who know two or more danger signs in newborn within first seven days

PVO	n	Estimate	95% c.i. (+/-)
ADRA	95	0.72	9%
CARE	76	0.52	11%
SAVE	95	0.78	8%
Network	266	0.70	6%

Percentage of newborns beginning breastfeeding within first hour after birth

PVO	n	Estimate	95% c.i. (+/-)
ADRA	94	0.03	4%
CARE	75	0.31	11%
SAVE	95	0.41	10%
Network	264	0.28	5%

Percentage of mothers of children ages 0-5 months exclusively breastfeeding

PVO	n	Estimate	95% c.i. (+/-)
Network	138	0.23	7%

Percentage of men who know two or more danger signs in newborn within first seven days

PVO	n	Estimate	95% c.i. (+/-)
ADRA	95	0.55	10%
CARE	76	0.42	11%
SAVE	95	0.52	10%
Network	266	0.50	6%

Percentage of newborns placed with mothers immediately after birth

PVO	n	Estimate	95% c.i. (+/-)
ADRA	94	0.18	8%
CARE	75	0.42	11%
SAVE	95	0.31	10%
Network	264	0.30	6%

Percentages of mothers of children ages 6-9 months complementary feeding

PVO	n	Estimate	95% c.i. (+/-)
Network	93	0.04	89%

PLEASE CIRCLE THE RESPONDENT'S ANSWERS

SECTION 1: RESPONDENT INFORMATION

I would like to first ask you some questions about your background:

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
1	What is the highest level of education you have attained?	NONE 1 SOME PRIMARY.....2 PRIMARY3 SECONDARY.....4 HIGHER.....5 OTHER _____ 96 (SPECIFY)		
2	What is your religion? IF RESPONSE IS "CHRISTIAN" PROBE: "WHAT IS THE SPECIFIC DENOMINATION?"	GRIGORIAN..... 1 CATHOLIC.....2 PROTESTANT3 MOSLEM4 NOT RELIGIOUS.....5 → SEC2 OTHER _____ 96 (SPECIFY) DON'T KNOW 88		
3	Does your religion prohibit you to use medications and receive health services? IF YES: Which medications and health services are prohibited? _____	YES.....1 NO.....2		

SECTION 2: SAFE MOTHERHOOD
SECTION 2A: PRENATAL CARE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
1 *N	<p>What are the danger signs in pregnancy that make you go for health care right away?</p> <p>CIRCLE ALL MENTIONED.</p> <p>PROBE: "Any others?"</p>	<p>CONVULSIONS..... 1 PALE EYE LIDS..... 2 VAGINAL BLEEDING..... 3 LABORED BREATHING..... 4 SEVERE HEADACHE..... 5 SWOLLEN HANDS/FACE 6 HIGH FEVER..... 7 SEVERE ABDOMINAL PAIN..... 8</p> <p>OTHER _____ 96 (SPECIFY)</p> <p>DON'T KNOW..... 88</p>		
2 *N	<p>What are the danger signs during labor/delivery that require health care right away?</p> <p>CIRCLE ALL MENTIONED.</p> <p>PROBE: "Any others?"</p>	<p>CONVULSIONS..... 1 FEVER..... 2 CHILLS 3 HEAVY VAGINAL BLEEDING... 4 OFFENSIVE SMELLING DISCHARGE 5 LABOR LONGER THAN 12 HOURS 6 MALPRESENTATIONS (SEEING FEET OR ARM COMING OUT) 7 PLACENTA NOT DELIVERED IN 30 MINUTES OR NEVER DELIVERED..... 8</p> <p>OTHER _____ 96 (SPECIFY)</p> <p>DON'T KNOW..... 88</p>		
3 *N	<p>What are the danger signs after delivery that make you go for health care right away?</p> <p>CIRCLE ALL MENTIONED.</p> <p>PROBE: "Any others?"</p>	<p>CONVULSIONS..... 1 FEVER..... 2 CHILLS 3 HEAVY VAGINAL BLEEDING... 4 OFFENSIVE SMELLING DISCHARGE 5 SEVERE LOWER ABDOMINAL PAINS..... 6</p> <p>OTHER _____ 96 (SPECIFY)</p> <p>DON'T KNOW..... 88</p>		

4	<p>Where did you learn about these danger signs?</p>	<p>FRIEND..... 1 FAMILY/RELATIVE..... 2</p> <p>GOV. HOSPITAL..... 3 POLICLINIC 4</p> <p>HEALTH CENTER..... 5 AMBULATORY..... 6 MEDICAL POINT..... 7 TRADITIONAL PRACTITIONER..... 8 TV, RADIO, MASS MEDIA..... 9 LITERATURE..... 10 OTHER _____ 96 (SPECIFY)</p>		
5 *N	<p>Where would a woman go if she were experiencing danger signs during pregnancy, delivery, or after delivery?</p> <p>CIRCLE ALL MENTIONED.</p> <p>PROBE: "Any others?"</p>	<p>GOV. HOSPITAL..... 1 POLICLINIC 2</p> <p>HEALTH CENTER..... 3 AMBULATORY..... 4 MEDICAL POINT..... 5 TRADITIONAL PRACTITIONER..... 6</p> <p>DON'T KNOW..... 88</p> <p>OTHER _____ 96 (SPECIFY)</p>		
6 *N	<p>If you need to seek health care for these danger signs, who decides you can go?</p> <p>CIRCLE ALL MENTIONED.</p> <p>PROBE: "Any others?"</p>	<p>SELF 1 PARTNER..... 2 BOTH PARTNERS..... 3 MOTHER-IN-LAW..... 4 OTHER RELATIVE 5 DOCTOR..... 6 NURSE 7</p> <p>OTHER _____ 96 (SPECIFY)</p>		
7 *N	<p>Where is the closest place a woman can go to be delivered by a clinically -trained practitioner?</p> <p>NAME OF FACILITY MENTIONED</p> <p>_____</p> <p>NAME OF CLOSEST FACILITY</p> <p>_____</p>	<p>MENTIONS CORRECT FACILITY..... 1 INCORRECT FACILITY..... 2</p> <p>DON'T KNOW..... 88</p>		

SECTION 2B: NEWBORN CARE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
1 *N	<p>What are the first signs that show a newborn baby is ill?</p> <p>CIRCLE ALL MENTIONED.</p> <p>PROBE: "Any others?"</p>	<p>NOT BREATHING..... 1</p> <p>SKIN COLOR OF PALMS AND SOLES IS YELLOW (JAUNDICE)..... 2</p> <p>SKIN COLOR OF PALMS AND SOLES IS BLUE 3</p> <p>BABY IS VERY COLD (HYPOTHERMIA)..... 4</p> <p>UNABLE TO SUCK..... 5</p> <p>SKIN LESIONS (OR BLISTERS)..... 6</p> <p>BABY WON'T CRY 7</p> <p>FEVER 8</p> <p>SEIZURES/CONVULSIONS/TREMORS 9</p> <p>OTHER _____ 96 (SPECIFY)</p> <p>DON'T KNOW..... 88</p>		

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
2 *N	<p>What are the signs to watch for within the first 7 days after birth that may indicate that a newborn baby is ill?</p> <p>CIRCLE ALL MENTIONED.</p> <p>PROBE: "Any others?"</p>	<p>LABOURED BREATHING (GREATER THAN 60/SEC).. 1</p> <p>SKIN COLOR OF PALMS AND SOLES IS YELLOW (JAUNDICE)..... 2</p> <p>SKIN COLOR OF PALMS AND SOLES IS BLUE 3</p> <p>BABY IS VERY COLD/SHIVERING (HYPOTHERMIA)..... 4</p> <p>POOR SUCKING OR FEEDING..... 5</p> <p>VOMITING..... 6</p> <p>CONVULSIONS..... 7</p> <p>RIGIDITY..... 8</p> <p>FREQUENT WATERY STOOLS OR STOOLS WITH MUCUS OR WITH BLOOD 9</p> <p>FAILURE TO PASS URINE OR STOOL..... 10</p> <p>RED SWOLLEN EYES WITH DISCHARGE..... 11</p> <p>REDNESS AND DISCHARGE AROUND THE CORD..... 12</p> <p>SKIN LESIONS (OR BLISTERS)..... 13</p> <p>FEVER..... 14</p> <p>OTHER _____ 96</p> <p>(SPECIFY)</p> <p>DON'T KNOW..... 88</p>		
3	<p>Where did you learn about these danger signs?</p>	<p>FRIEND..... 1</p> <p>FAMILY/RELATIVE..... 2</p> <p>GOV. HOSPITAL..... 3</p> <p>POLICLINIC..... 4</p> <p>HEALTH CENTER..... 5</p> <p>AMBULATORY..... 6</p> <p>MEDICAL POINT..... 7</p> <p>TRADITIONAL PRACTITIONER..... 8</p> <p>TV,RADIO, MASS MEDIA.....9</p> <p>LITERATURE 10</p> <p>OTHER _____ 96</p> <p>(SPECIFY)</p>		

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
4 *N	When the baby/child is ill, who decides to get or seek medical help? CIRCLE ALL MENTIONED. PROBE: "Any others?"	THE CHILD'S MOTHER (WOMAN) 1 HER PARTNER..... 2 BOTH PARTNERS..... 3 MOTHER-IN-LAW..... 4 OTHER RELATIVE 5 DOCTOR..... 6 NURSE 7 OTHER _____ 96 (SPECIFY)		

SECTION 3: POST-ABORTION CARE AND FAMILY PLANNING

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
1	Have you ever been pregnant?	YES 1 NO 2	→15	
2 *N	Have you ever given birth? IF YES: How many children have you given birth to?	YES 1 NO 2 # of deliveries _____	→7	
3	What is the name of your youngest child? (IF LIVING)	NOTE NAME _____		
4	When was (NAME) born?	____/____/____ DD/MM/YY		
5A *N	Did you give birth to any child, living or dead, before (NAME)?	YES 1 NO 2	→6	
5B	When did you give birth to the child before (NAME)?	____/____/____ DD/MM/YY		
6 *N	How old were you the first time you gave birth?	NUMBER OF YEARS _____		

7	How many miscarriages have you ever had? (RECORD NUMBER)	# of miscarriages ____ ____		
8	How many stillbirths have you ever had? (RECORD NUMBER)	# of stillbirths ____ ____		
9	How many (induced) abortions have you ever had? (RECORD NUMBER)	# of induced abortions ____ ____	IF 0 SKIP TO 11	
10	How many (induced) abortions have you had in the past 12 months?	# of induced abortions ____ ____		
11	How many self-induced abortions have you ever had? (RECORD NUMBER)	# of self-induced abortions ____ ____	IF 0 SKIP TO 13	
12	How many self-induced abortions have you had in the past 12 months?	# of self-induced abortions ____ ____ IF NEVER HAD ABORTION	→ 16	
13	Were you informed about the availability of post-abortion contraceptive methods after the abortion?	YES 1 NO 2 DON'T KNOW/REMEMBER.... 88	→ 16 → 16	
14	Which methods were you informed about? RECORD ALL METHODS MENTIONED PROBE: "ANY OTHER METHODS?"	NORPLANT 1 INJECTIONS 2 PILL 3 IUD 4 BARRIER METHOD/ DIAPHRAGM 5 CONDOM 6 FOAM/GEL 7 TUBAL LIGATION 8 VASECTOMY 9 RHYTHM 10 ABSTINENCE 11 WITHDRAWAL 12 OTHER _____ 96 (SPECIFY)		
15 *N	How long should a woman wait after the birth of a child to have another child? ____ yrs X 12 mo = ____ mo	MONTHS ____		

16 *N	<p>What can a woman or man do to avoid pregnancy?</p> <p>CIRCLE ALL MENTIONED.</p> <p>PROBE: "Any others?"</p>	<p>NORPLANT..... 1 INJECTIONS..... 2 PILL..... 3 IUD..... 4 BARRIER METHOD/ DIAPHRAGM..... 5 CONDOM..... 6 FOAM/GEL..... 7 TUBAL LIGATION..... 8 VASECTOMY..... 9 LACTATIONAL AMENORRHEA (EXCLUSIVE BREAST FEEDING)..... 10 RHYTHM..... 11 ABSTINENCE..... 12 WITHDRAWAL..... 13</p> <p>OTHER _____ 96 (SPECIFY)</p> <p>DON'T KNOW 88</p>		
17	<p>Where did you receive the information about these methods?</p>	<p>FRIEND..... 1 RELATIVE..... 2 HUSBAND..... 3</p> <p>GOV. HOSPITAL..... 4 POLICLINIC..... 5</p> <p>HEALTH CENTER..... 6 AMBULATORY..... 7 MEDICAL POINT..... 8 TRADITIONAL PRACTITIONER..... 9 TV, RADIO, MASS MEDIA..... 10 LITERATURE..... 11</p> <p>OTHER _____ 96 (SPECIFY)</p>		
18 *N	<p>Are you currently doing something or using any method to delay or avoid getting pregnant?</p> <p>REFER TO SECTION 4, #21, "HAVE YOU EVER HAD SEXUAL INTERCOURSE," WHEN INTERPRETING THIS QUESTION.</p>	<p>YES..... 1 NO..... 2</p>	→21	

<p>19 *N</p>	<p>What is the main method you or your husband/partner are using now to avoid/postpone getting pregnant?</p> <p>ONE ANSWER ONLY</p> <p>PROBE FOR MAIN METHOD: "What is the method you use most of the time?"</p>	<p>NORPLANT..... 1 INJECTIONS..... 2 PILL..... 3 IUD..... 4 BARRIER METHOD/ DIAPHRAGM..... 5 CONDOM..... 6 FOAM/GEL..... 7 TUBAL LIGATION..... 8 VASECTOMY..... 9 LACTATIONAL AMENORRHEA (EXCLUSIVE BREASTFEEDING) 10 RHYTHM..... 11 ABSTINENCE..... 12 WITHDRAWAL..... 13</p> <p>OTHER _____ 96 (SPECIFY)</p>		
<p>20 *N</p>	<p>How long have you been using this method?</p> <p>____yrs. X 12 mo. = ____mo.</p>	<p>MONTHS __ __</p>		
<p>21 *N</p>	<p>Who decides whether or not to use a method or what method to use?</p> <p>CIRCLE ALL MENTIONED.</p> <p>PROBE: "Anyone else?"</p>	<p>SELF..... 1 MALE/PARTNER/SPOUSE..... 2 BOTH PARTNERS..... 3 MOTHER-IN-LAW..... 4 RELATIVE..... 5 DOCTOR..... 6 NURSE..... 7 MIDWIFE..... 8 OTHER _____ 96 (SPECIFY)</p>		

22	<p>FOR WOMAN NOT USING A FAMILY PLANNING METHOD.</p> <p>What is the main reason you are not using a method?</p> <p>ONE ANSWER ONLY.</p>	<p>NOT MARRIED..... 1</p> <p>NOT HAVING SEX..... 2</p> <p>INFREQUENT SEX..... 3</p> <p>BREAST FEEDING..... 4</p> <p>WANTS MORE CHILDREN..... 5</p> <p>PREGNANT 6</p> <p>OPPOSED TO USING METHOD..... 7</p> <p>PARTNER IS OPPOSED..... 8</p> <p>OTHER IS OPPOSED..... 9</p> <p>RELIGIOUS REASON..... 10</p> <p>DOESN'T KNOW WHERE TO GET METHOD..... 11</p> <p>HEALTH CONCERNS..... 12</p> <p>FEAR OF SIDE EFFECTS..... 13</p> <p>TOO EXPENSIVE..... 14</p> <p>INCONVENIENT..... 15</p> <p>OTHER_____ 96</p> <p>(SPECIFY)</p> <p>DOESN'T KNOW..... 88</p>		
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SECTION 4: SEXUALLY TRANSMITTED INFECTIONS AND HIV/AIDS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
1	<p>Do you know of any infections a person can get through sexual intercourse?</p>	<p>YES..... 1</p> <p>NO..... 2</p>	→21	
2	<p>Which infections do you know about?</p> <p>CIRCLE ALL MENTIONED</p> <p>PROBE: "Any others?"</p>	<p>HIV/AIDS..... 1</p> <p>GONORRHEA/TRIPPEER..... 2</p> <p>SYPHILIS..... 3</p> <p>CHLAMYDIA..... 4</p> <p>GENITAL WARTS..... 5</p> <p>GENITAL HERPES..... 6</p> <p>HEPATITIS B OR C..... 7</p> <p>TRICHOMONAS..... 8</p> <p>OTHER_____ 96</p> <p>SPECIFY</p> <p>DON'T KNOW..... 88</p>		
3	<p>Is there anything a person can do to avoid getting STIs?</p>	<p>YES..... 1</p> <p>NO..... 2</p>	→5	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
4	What can a person do to avoid getting STI? CIRCLE ALL RESPONSES PROBE: "Any other ways?"	ABSTAIN FROM SEX..... 1 USE CONDOMS..... 2 LIMIT SEX TO ONE PARTNER/STAY FAITHFUL TO ONE PARTNER..... 3 AVOID SEX WITH PROSTITUTES..... 4 AVOID SEX WITH PERSONS WHO HAVE MANY PARTNERS..... 5 OTHER _____ 96 (SPECIFY) OTHER _____ 99 (SPECIFY) DON'T KNOW..... 88		
5	If you had an STI, what could you do to confirm it? CIRCLE ALL MENTIONED PROBE: "Anything else?"	GO FOR TEST 1 GO TO HEALTH FACILITY..... 2 OTHER _____ 96 SPECIFY DON'T KNOW..... 88		
6	If you wanted to be tested for STI, where would you go? CIRCLE ALL MENTIONED REINFORCE: "WHICH PLACE?" PROBE: "Anywhere else?"	HOSPITAL..... 1 POLICLINIC 2 AMBULATORY..... 3 OTHER _____ 96 (SPECIFY) DON'T KNOW..... 88		
7	Have you heard of a counseling and testing service for STIs?	YES 1 NO 2	→9	
8	Where did you hear about it? CIRCLE ALL MENTIONED PROBE: "Anywhere else?"	RADIO 1 TV..... 2 NEWSPAPER..... 3 WRITTEN MATERIAL OTHER THAN NEWSPAPER..... 4 SOMEONE TOLD ME 5 OTHER _____ 96 (SPECIFY) DON'T KNOW..... 88		

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
9	What do you think are the reasons to get tested for STIs? CIRCLE ALL MENTIONED PROBE: "Anything else?"	MARRIAGE 1 FAMILY PLANNING..... 2 PLAN FOR THE FUTURE 3 PROTECT PARTNER..... 4 PROTECT CHILD..... 5 IF I HAVE STI SYMPTOMS..... 6 OTHER _____ 96 (SPECIFY) DON'T KNOW..... 88		
10	What would be reasons NOT to get tested for STIs? CIRCLE ALL MENTIONED PROBE: "Anything else?"	FEAR OF KNOWING..... 1 STIGMA 2 OTHER _____ 96 (SPECIFY) DON'T KNOW..... 88		
11	Would you talk to your partner/spouse before having an STI test?	YES 1 NO 2 DON'T KNOW..... 88		
12	Would you tell your partner/spouse the results of an STI test?	YES 1 NO 2 DON'T KNOW..... 88		
13	Who should go for an STI test? CIRCLE ALL MENTIONED PROBE: "Anyone else?"	SEX WORKERS 1 USERS OF SEX WORKERS 2 TRUCK DRIVERS, SOLDIERS. 3 MIGRANT WORKERS..... 4 ANYONE AT-RISK..... 5 THOSE WITH MULTIPLE PARTNERS..... 6 ANYONE SEXUALLY ACTIVE... 7 THOSE GETTING MARRIED 8 ANYONE WITH AN STI SYMPTOM..... 9 OTHER..... 96 (SPECIFY) DON'T KNOW..... 88		

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
14 *N	<p>How does a man know he has a sexual infection?</p> <p>CIRCLE ALL MENTIONED</p> <p>PROBE: "Anything else?"</p>	<p>LOWER ABDOMINAL PAIN..... 1</p> <p>GENITAL DISCHARGE/ DRIPPING..... 2</p> <p>FOUL SMELLING DISCHARGE..... 3</p> <p>BURNING PAIN ON URINATION..... 4</p> <p>FREQUENT URINATION..... 5</p> <p>REDNESS/INFLAMMATION IN GENITAL AREA..... 6</p> <p>PAIN/SWELLING IN GENITAL AREA/SCROTUM..... 7</p> <p>GENITAL SORES/ULCERS..... 8</p> <p>GENITAL WARTS..... 9</p> <p>BLOOD IN URINE..... 10</p> <p>LOSS OF WEIGHT 11</p> <p>IMPOTENCE..... 12</p> <p>NO SYMPTOMS..... 13</p> <p>OTHER _____ 96 (SPECIFY)</p> <p>DON'T KNOW..... 88</p>		
15 *N	<p>How does a woman know she has a sexual infection?</p> <p>CIRCLE ALL MENTIONED</p> <p>PROBE: "Anything else?"</p>	<p>LOWER ABDOMINAL PAIN..... 1</p> <p>GENITAL DISCHARGE/ DRIPPING..... 2</p> <p>FOUL SMELLING DISCHARGE..... 3</p> <p>BURNING PAIN ON URINATION..... 4</p> <p>FREQUENT URINATION..... 5</p> <p>REDNESS/INFLAMMATION IN GENITAL AREA..... 6</p> <p>PAIN/SWELLING IN GENITAL AREA..... 7</p> <p>GENITAL SORES/ULCERS..... 8</p> <p>GENITAL WARTS..... 9</p> <p>BLOOD IN URINE..... 10</p> <p>LOSS OF WEIGHT 11</p> <p>INFERTILITY..... 12</p> <p>NO SYMPTOMS..... 13</p> <p>OTHER _____ 96 (SPECIFY)</p> <p>DON'T KNOW..... 88</p>		

16 *N	<p>Where could you go to be treated for such an infection?</p> <p>CIRCLE ALL MENTIONED</p> <p>PROBE: "Anywhere else?"</p>	<p>GOV. HOSPITAL..... 1 HEALTH CENTER..... 2 POLICLINIC..... 3 AMBULATORY..... 4 TRADITIONAL PRACTITIONER..... 5 OTHER _____ 96 (SPECIFY) DON'T KNOW..... 88</p>		
17 *N	<p>Have you ever heard of an illness called HIV/AIDS?</p>	<p>YES..... 1 NO..... 2</p>	→21	_____
18	<p>As far as you know, what are the ways a person can get HIV/AIDS?</p> <p>CIRCLE ALL RESPONSES</p> <p>PROBE: "Any other ways?"</p>	<p>SEXUAL INTERCOURSE..... 1 BLOOD TRANSFUSION..... 2 SHARING NEEDLES..... 3 MOTHER TO BABY DURING DELIVERY..... 4 THROUGH BREAST MILK..... 5 MOSQUITO OR OTHER INSECT BITES..... 6 CASUAL CONTACT WITH INFECTED PERSON (kissing, sharing food, shaking hands, etc.)..... 7 SHARING RAZOR BLADES..... 8 OTHER _____ 96 SPECIFY DON'T KNOW..... 88</p>		
19 *N	<p>Is there anything a person can do to avoid getting an HIV /AIDS infection?</p>	<p>YES..... 1 NO..... 2 DON'T KNOW..... 88</p>	→21 →21	_____

20 *N	<p>What can a person do to avoid getting an HIV/AIDS infection?</p> <p>CIRCLE ALL MENTIONED</p> <p>PROBE: "Anything else?"</p>	<p>ABSTAIN FROM SEX..... 1</p> <p>USE CONDOMS..... 2</p> <p>LIMIT SEX TO ONE PARTNER/STAY FAITHFUL TO ONE PARTNER..... 3</p> <p>AVOID SEX WITH PROSTITUTES..... 4</p> <p>AVOID SEX WITH PERSONS WHO HAVE MANY PARTNERS..... 5</p> <p>AVOID SEX WITH HOMOSEXUALS..... 6</p> <p>AVOID SEX WITH PERSONS WHO INJECT DRUGS INTRAVENOUSLY..... 7</p> <p>AVOID BLOOD TRANSFUSIONS..... 8</p> <p>AVOID IV DRUG ABUSE..... 9</p> <p>AVOID KISSING..... 10</p> <p>AVOID MOSQUITO BITES..... 11</p> <p>SEEK PROTECTION FROM TRADITIONAL HEALER..... 12</p> <p>AVOID SHARING RAZORS, BLADES..... 13</p> <p>OTHER..... 96 (SPECIFY)</p> <p>OTHER..... 99 (SPECIFY)</p> <p>DON'T KNOW..... 88</p>		
21	Have you ever had sexual intercourse?	<p>YES..... 1</p> <p>NO..... 2</p>	→25	
22 *N	Does your partner use a condom each time you have intercourse?	<p>YES..... 1</p> <p>NO/SOMETIMES..... 2</p>	→24A	
23	<p>On occasions when your partner did not use a condom, why didn't he use it?</p> <p>CIRCLE ALL MENTIONED</p> <p>PROBE: "Anything else?"</p>	<p>THEY BREAK..... 1</p> <p>TOO EXPENSIVE..... 2</p> <p>DON'T LIKE TO USE..... 3</p> <p>LESS SATISFACTION..... 4</p> <p>DON'T KNOW WHERE TO GET..... 5</p> <p>PARTNER REFUSED..... 6</p> <p>NOT AVAILABLE..... 7</p> <p>OTHER..... 96 (SPECIFY)</p> <p>DON'T KNOW..... 88</p>		

24A	Did your partner use a condom the last time you had sexual intercourse?	YES 1 NO 2		_____
24B	Have you ever used the same condom twice?	YES 1 NO 2		_____
25	Does the use of a condom during sexual intercourse reduce the risk of STIs or HIV/AIDS?	YES 1 NO 2 DON'T KNOW..... 88		_____
26 *N	Where is the nearest place a person would go to get condoms? WRITE PLACE HERE _____	NAMES NEAREST PLACE THAT HAS CONDOMS..... 1 DON'T KNOW..... 88		_____
27	Can you tell me how to put on a condom? CIRCLE ALL MENTIONED PROBE: "Anything else?"	CHECK DATE EXPIRES 1 TEAR PACKAGE OPEN 2 HOLD TIP WHILE UNROLLING. 3 PUT ON ERECT PENIS..... 4 IF UPSIDE DOWN AND TOUCHES THE PENIS, USE NEW CONDOM 5 CHECK FOR TEARS..... 6 REFUSE TO ANSWER..... 96 DON'T KNOW..... 88		_____

Thank you for participation.

PLEASE CIRCLE THE RESPONDENT'S ANSWERS

SECTION 1: RESPONDENT INFORMATION

First I would like to ask you a few questions about your background:

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
1	What is the highest level of education you have attained?	NONE1 SOME PRIMARY.....2 PRIMARY.....3 SECONDARY.....4 HIGHER.....5 OTHER _____ 96 (SPECIFY)		
2	What is your religion? IF RESPONSE IS "CHRISTIAN" PROBE: "WHAT IS THE SPECIFIC DENOMINATION?"	GRIGORIAN.....1 CATHOLIC.....2 PROTESTANT.....3 MOSLEM.....4 NOT RELIGIOUS.....5 OTHER _____ 96 (SPECIFY) DON'T KNOW.....88	→ SEC2	
3	Does your religion prohibit you to use medications and receive health services? IF YES: Which medications and health services are prohibited? _____	YES 1 NO 2		

SECTION 2: SAFE MOTHERHOOD

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
1 *N	<p>What are the danger signs in pregnancy that make you take a woman for health care right away?</p> <p>CIRCLE ALL MENTIONED</p> <p>PROBE: "Any others?"</p>	<p>CONVULSIONS..... 1 PALE EYE LIDS.....2 VAGINAL BLEEDING.....3 LABORED BREATHING.....4 SEVERE HEADACHE.....5 SWOLLEN HANDS/FACE.....6 HIGH FEVER.....7 SEVERE ABDOMINAL PAIN.....8</p> <p>OTHER_____ 96 (SPECIFY)</p> <p>DON'T KNOW.....88</p>		
2 *N	<p>What are the danger signs during labor/delivery for which a woman requires health care right away?</p> <p>CIRCLE ALL MENTIONED</p> <p>PROBE: "Any others?"</p>	<p>CONVULSIONS..... 1 FEVER.....2 CHILLS.....3 HEAVY VAGINAL BLEEDING...4 OFFENSIVE SMELLING DISCHARGE 5 LABOR LONGER THAN 12 HOURS.....6 MALPRESENTATIONS (SEEING FEET OR ARM COMING OUT) 7 PLACENTA NOT DELIVERED IN 30 MINUTES OR NEVER DELIVERED.....8</p> <p>OTHER_____ 96 (SPECIFY)</p> <p>DON'T KNOW.....88</p>		
3 *N	<p>What are the danger signs after delivery that make you take a woman for health care right away?</p> <p>CIRCLE ALL MENTIONED</p> <p>PROBE: "Any others?"</p>	<p>CONVULSIONS..... 1 FEVER.....2 CHILLS.....3 HEAVY VAGINAL BLEEDING...4 OFFENSIVE SMELLING DISCHARGE.....5 SEVERE LOWER ABDOMINAL PAINS.....6</p> <p>OTHER_____ 96 (SPECIFY)</p> <p>DON'T KNOW.....88</p>		

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
4	<p>Where did you learn about these danger signs?</p>	<p>FRIEND..... 1 FAMILY/RELATIVE..... 2</p> <p>GOV. HOSPITAL..... 3 POLICLINIC..... 4</p> <p>HEALTH CENTER..... 5 AMBULATORY..... 6 MEDICAL POINT..... 7 TRADITIONAL PRACTITIONER..... 8 TV, RADIO, MASS MEDIA..... 9 LITERATURE..... 10</p> <p>OTHER _____ 96 (SPECIFY)</p>		
5 *N	<p>Where would a woman go if she were experiencing danger signs during pregnancy, delivery, or after delivery?</p> <p>CIRCLE ALL MENTIONED</p> <p>PROBE: "Anywhere else?"</p>	<p>GOV. HOSPITAL..... 1 POLICLINIC..... 2</p> <p>HEALTH CENTER..... 3 AMBULATORY..... 4 MEDICAL POINT..... 5 TRADITIONAL PRACTITIONER..... 6</p> <p>DON'T KNOW..... 88</p> <p>OTHER _____ 96 (SPECIFY)</p>		_____
6 *N	<p>If your partner needs to seek health care for these danger signs, who decides she can go?</p> <p>CIRCLE ALL MENTIONED</p> <p>PROBE: "Anyone else?"</p>	<p>THE PATIENT (WOMAN)..... 1 HER PARTNER..... 2 BOTH PARTNERS..... 3 MOTHER (OF MAN)..... 4 OTHER RELATIVE..... 5 DOCTOR..... 6 NURSE..... 7</p> <p>DON'T KNOW..... 88</p> <p>OTHER _____ 96 (SPECIFY)</p>		_____

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
7 *N	<p>Where is the closest place for a woman can go to be delivered by a clinically –trained practitioner?</p> <p>NAME OF FACILITY MENTIONED</p> <p>_____</p> <p>NAME OF CLOSEST FACILITY</p> <p>_____</p>	<p>MENTIONS CORRECT FACILITY..... 1</p> <p>INCORRECT FACILITY.....2</p> <p>DON'T KNOW.....88</p>		

SECTION 3: NEWBORN CARE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
1 *N	<p>What are the first signs that show a newborn baby is ill?</p> <p>CIRCLE ALL MENTIONED</p> <p>PROBE: "Any others?"</p>	<p>NOT BREATHING..... 1</p> <p>SKIN COLOR OF PALMS AND SOLES IS YELLOW (JAUNDICE).....2</p> <p>SKIN COLOR OF PALMS AND SOLES IS BLUE.....3</p> <p>BABY IS VERY COLD/SHIVERING (HYPOTHERMIA).....4</p> <p>UNABLE TO SUCK.....5</p> <p>SKIN LESIONS (OR BLISTERS).....6</p> <p>BABY WON'T CRY.....7</p> <p>FEVER.....8</p> <p>SEIZURES/CONVULSIONS/TREMORS.....9</p> <p>OTHER.....96 (SPECIFY)</p> <p>DON'T KNOW.....88</p>		

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
2 *N	<p>What are the signs to watch for within the first 7 days after birth that may indicate that a newborn baby is ill?</p> <p>CIRCLE ALL MENTIONED</p> <p>PROBE: "Any others?"</p>	<p>LABOURED BREATHING (GREATER THAN 60/SEC)... 1</p> <p>SKIN COLOR OF PALMS AND SOLES IS YELLOW (JAUNDICE)..... 2</p> <p>SKIN COLOR OF PALMS AND SOLES IS BLUE 3</p> <p>BABY IS VERY COLD/SHIVERING (HYPOTHERMIA)..... 4</p> <p>POOR SUCKING OR FEEDING..... 5</p> <p>VOMITING..... 6</p> <p>CONVULSIONS..... 7</p> <p>RIGIDITY..... 8</p> <p>FREQUENT WATERY STOOLS OR STOOLS WITH MUCUS OR WITH BLOOD 9</p> <p>FAILURE TO PASS URINE OR STOOL..... 10</p> <p>RED SWOLLEN EYES WITH DISCHARGE..... 11</p> <p>REDNESS AND DISCHARGE AROUND THE CORD..... 12</p> <p>SKIN LESIONS (OR BLISTERS)..... 13</p> <p>FEVER..... 14</p> <p>OTHER _____ 96 (SPECIFY)</p> <p>DON'T KNOW..... 88</p>		

3	Where did you learn about these danger signs?	FRIEND..... 1 FAMILY/RELATIVE..... 2 GOV. HOSPITAL..... 3 POLICLINIC..... 4 HEALTH CENTER..... 5 AMBULATORY..... 6 MEDICAL POINT..... 7 TRADITIONAL PRACTITIONER..... 8 TV, RADIO, MASS MEDIA..... 9 LITERATURE..... 10 OTHER _____ 96 (SPECIFY)		
4 *N	When the baby/child is ill, who decides to get or seek medical help? CIRCLE ALL MENTIONED PROBE: "Any others?"	THE CHILD'S MOTHER (WOMAN) 1 HER PARTNER..... 2 BOTH PARTNERS..... 3 MOTHER-IN-LAW..... 4 OTHER RELATIVE..... 5 DOCTOR..... 6 NURSE..... 7 OTHER _____ 96 (SPECIFY)		

SECTION 4: FAMILY PLANNING

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
1	Are you currently doing something or using any method to delay or avoid getting your spouse/partner pregnant?	YES 1 NO 2	→ 3	_____
2	What is the main method you or your spouse/partner are using now? ONE RESPONSE ONLY PROBE FOR MAIN METHOD: “What method do you use most of the time?”	NORPLANT 01 INJECTIONS 02 PILL 03 IUD 04 BARRIER METHOD/DIAPHRAGM 05 CONDOM 06 FOAM/GEL 07 TUBAL LIGATION 08 VASECTOMY 09 LACTATIONAL AMENORRHEA (EXCLUSIVE BREASTFEEDING) 10 RHYTHM 11 ABSTINENCE 12 WITHDRAWAL 13 OTHER _____ 96 (SPECIFY)		_____
3 *N	Who decides whether or not to use a method or what method to use? CIRCLE ALL MENTIONED PROBE: “Anyone else?”	SELF 1 PARTNER (WOMAN) 2 BOTH PARTNERS 3 MOTHER (OF MAN) 4 OTHER RELATIVE 5 DOCTOR 6 NURSE 7 OTHER _____ 96 (SPECIFY)		_____

SECTION 5: SEXUALLY TRANSMITTED INFECTIONS AND HIV/AIDS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
1	Do you know of any infections a person can get through sexual intercourse?	YES 1 NO 2	→21	
2	Which infections do you know about? CIRCLE ALL RESPONSES PROBE: "Any others?"	HIV/AIDS..... 1 GONORRHEA/TRIPPEER..... 2 SYPHILIS..... 3 CHLAMYDIA..... 4 GENITAL WARTS..... 5 GENITAL HERPES..... 6 HEPATITIS B OR C..... 7 TRICHOMONAS..... 8 OTHER _____ 96 SPECIFY DON'T KNOW..... 88		
3	Is there anything a person can do to avoid getting STIs?	YES 1 NO 2	→5	
4	What can a person do to avoid getting STI? CIRCLE ALL MENTIONED PROBE: "Any other ways?"	ABSTAIN FROM SEX..... 1 USE CONDOMS..... 2 LIMIT SEX TO ONE PARTNER/STAY FAITHFUL TO ONE PARTNER..... 3 AVOID SEX WITH PROSTITUTES..... 4 AVOID SEX WITH PERSONS WHO HAVE MANY PARTNERS 5 OTHER _____ 96 (SPECIFY) OTHER _____ 99 (SPECIFY) DON'T KNOW..... 88		
5	If you had an STI, what could you do to confirm it? CIRCLE ALL MENTIONED PROBE: "Anything else?"	GO FOR TEST 1 GO TO HEALTH FACILITY..... 2 OTHER _____ 96 SPECIFY DON'T KNOW..... 88		

6	<p>If you wanted to be tested for STI, where would you go?</p> <p>CIRCLE ALL MENTIONED</p> <p>REINFORCE: "WHICH PLACE?"</p> <p>PROBE: "Anywhere else?"</p>	<p>HOSPITAL..... 1</p> <p>POLICLINIC 2</p> <p>AMBULATORY..... 3</p> <p>OTHER _____ 96</p> <p>(SPECIFY)</p> <p>DON'T KNOW..... 88</p>		
7	<p>Have you heard of a testing service for STIs?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW..... 88</p>	<p>→9</p> <p>→9</p>	
8	<p>Where did you hear about it?</p> <p>CIRCLE ALL MENTIONED</p> <p>PROBE: "Anywhere else?"</p>	<p>RADIO 1</p> <p>TV..... 2</p> <p>NEWSPAPER..... 3</p> <p>WRITTEN MATERIAL OTHER THAN NEWSPAPER..... 4</p> <p>SOMEONE TOLD ME 5</p> <p>OTHER _____ 96</p> <p>(SPECIFY)</p> <p>DON'T KNOW..... 88</p>		
9	<p>What do you think are the reasons to get tested for STIs?</p> <p>CIRCLE ALL MENTIONED</p> <p>PROBE: "Anything else?"</p>	<p>MARRIAGE 1</p> <p>FAMILY PLANNING..... 2</p> <p>PLAN FOR THE FUTURE 3</p> <p>PROTECT PARTNER..... 4</p> <p>PROTECT CHILD..... 5</p> <p>IF I HAVE STI SYMPTOMS..... 6</p> <p>OTHER _____ 96</p> <p>(SPECIFY)</p> <p>DON'T KNOW..... 88</p>		
10	<p>What would be reasons NOT to get tested for STIs?</p> <p>CIRCLE ALL MENTIONED</p> <p>PROBE: "Anything else?"</p>	<p>FEAR OF KNOWING..... 1</p> <p>STIGMA 2</p> <p>OTHER _____ 96</p> <p>(SPECIFY)</p> <p>DON'T KNOW..... 88</p>		
11	<p>Would you talk to your partner/spouse before having an STI test?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW..... 88</p>		

12	Would you tell your partner/spouse the results of an STI test?	YES 1 NO 2 DON'T KNOW..... 88		
13	Who should go for an STI test? CIRCLE ALL MENTIONED PROBE: "Anyone else?"	SEX WORKERS 1 USERS OF SEX WORKERS 2 TRUCK DRIVERS, SOLDIERS. 3 MIGRANT WORKERS..... 4 ANYONE AT-RISK..... 5 THOSE WITH MULTIPLE PARTNERS..... 6 ANYONE SEXUALLY ACTIVE... 7 THOSE GETTING MARRIED 8 ANYONE WITH AN STI SYMPTOM..... 9 OTHER _____ 96 (SPECIFY) DON'T KNOW..... 88		
14 *N	How does a man know he has a sexual infection? CIRCLE ALL MENTIONED PROBE: "Anything else?"	LOWER ABDOMINAL PAIN..... 1 GENITAL DISCHARGE/ DRIPPING..... 2 FOUL SMELLING DISCHARGE 3 BURNING PAIN ON URINATION..... 4 FREQUENT URINATION..... 5 REDNESS/INFLAMMATION IN GENITAL AREA 6 PAIN/SWELLING IN GENITAL AREA/SCROTUM..... 7 GENITAL SORES/ULCERS..... 8 GENITAL WARTS..... 9 BLOOD IN URINE..... 10 LOSS OF WEIGHT 11 IMPOTENCE 12 NO SYMPTOMS..... 13 OTHER _____ 96 (SPECIFY) DON'T KNOW..... 88		

<p>15 *N</p>	<p>How does a woman know she has a sexual infection?</p> <p>CIRCLE ALL MENTIONED</p> <p>PROBE: "Anything else?"</p>	<p>LOWER ABDOMINAL PAIN..... 1 GENITAL DISCHARGE/ DRIPPING..... 2 FOUL SMELLING DISCHARGE..... 3 BURNING PAIN ON URINATION..... 4 FREQUENT URINATION..... 5 REDNESS/INFLAMMATION IN GENITAL AREA..... 6 PAIN/SWELLING IN GENITAL AREA..... 7 GENITAL SORES/ULCERS..... 8 GENITAL WARTS..... 9 BLOOD IN URINE..... 10 LOSS OF WEIGHT 11 INFERTILITY..... 12 NO SYMPTOMS..... 13 OTHER _____ 96 (SPECIFY)</p> <p>DON'T KNOW..... 88</p>		
<p>16</p>	<p>Where could you go to be treated for such an infection?</p> <p>CIRCLE ALL MENTIONED</p> <p>PROBE: "Anywhere else?"</p>	<p>GOV. HOSPITAL..... 1 HEALTH CENTER..... 2 POLICLINIC..... 3 AMBULATORY..... 4 TRADITIONAL PRACTITIONER..... 5</p> <p>OTHER _____ 96 (SPECIFY)</p> <p>DON'T KNOW 88</p>		
<p>17 *N</p>	<p>Have you ever heard of an illness called HIV/AIDS?</p>	<p>YES 1 NO 2</p>	<p>→21</p>	

18	<p>As far as you know, what are the ways a person can get HIV/AIDS?</p> <p>CIRCLE ALL RESPONSES</p> <p>PROBE: "Any other ways?"</p>	<p>SEXUAL INTERCOURSE..... 1</p> <p>BLOOD TRANSFUSION..... 2</p> <p>SHARING NEEDLES 3</p> <p>MOTHER TO BABY DURING DELIVERY..... 4</p> <p>THROUGH BREASTMILK..... 5</p> <p>MOSQUITO OR OTHER INSECT BITES..... 6</p> <p>CASUAL CONTACT WITH INFECTED PERSON (kissing, sharing food, shaking hands, etc.)..... 7</p> <p>SHARING RAZOR BLADES..... 8</p> <p>OTHER _____ 96</p> <p style="text-align: center;">SPECIFY</p> <p>DON'T KNOW..... 88</p>		
19 *N	<p>Is there anything a person can do to avoid getting an HIV/AIDS infection?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW..... 88</p>	<p>→21</p> <p>→21</p>	
20 *N	<p>What can a person do to avoid getting an HIV/AIDS infection?</p> <p>CIRCLE ALL MENTIONED</p> <p>PROBE: "Anything else?"</p>	<p>ABSTAIN FROM SEX..... 1</p> <p>USE CONDOMS..... 2</p> <p>LIMIT SEX TO ONE PARTNER/STAY FAITHFUL TO ONE PARTNER..... 3</p> <p>AVOID SEX WITH PROSTITUTES..... 4</p> <p>AVOID SEX WITH PERSONS WHO HAVE MANY PARTNERS..... 5</p> <p>AVOID SEX WITH HOMOSEXUALS..... 6</p> <p>AVOID SEX WITH PERSONS WHO INJECT DRUGS INTRAVENOUSLY..... 7</p> <p>AVOID BLOOD TRANSFUSIONS..... 8</p> <p>AVOID IV DRUG ABUSE..... 9</p> <p>AVOID KISSING..... 10</p> <p>AVOID MOSQUITO BITES..... 11</p> <p>SEEK PROTECTION FROM TRADITIONAL HEALER..... 12</p> <p>AVOID SHARING RAZORS, BLADES..... 13</p> <p>OTHER _____ 96</p> <p style="text-align: center;">(SPECIFY)</p> <p>DON'T KNOW..... 88</p>		

21	Have you ever had sexual intercourse?	YES 1 NO 2	→25	
22 *N	Do you use a condom each time you have intercourse?	YES 1 NO/SOMETIMES 2	→24A	_____
23	On occasions when you did not use a condom, why didn't you use it? CIRCLE ALL MENTIONED PROBE: "Anything else?"	THEY BREAK 1 TOO EXPENSIVE 2 DON'T LIKE TO USE 3 LESS SATISFACTION 4 DON'T KNOW WHERE TO GET 5 PARTNER REFUSED 6 NOT AVAILABLE 7 OTHER _____ 96 (SPECIFY) DON'T KNOW 88		
24A	Did you use a condom the last time you had sexual intercourse?	YES 1 NO 2		_____
24B	Have you ever used the same condom twice?	YES 1 NO 2		
25	Does the use of a condom during sexual intercourse reduce the risk of STIs or HIV/AIDS?	YES 1 NO 2 DON'T KNOW 88		
26 *N	Where is the nearest place a person would go to get condoms? WRITE PLACE HERE _____	NAMES NEAREST PLACE THAT HAS CONDOMS 1 DON'T KNOW 88		_____
27	Can you tell me how to put on a condom? CIRCLE ALL MENTIONED PROBE: "Anything else?"	CHECK DATE EXPIRES 1 TEAR PACKAGE OPEN 2 HOLD TIP WHILE UNROLLING. 3 PUT ON ERECT PENIS 4 IF UPSIDE DOWN AND TOUCHES THE PENIS, USE NEW CONDOM 5 CHECK FOR TEARS 6 REFUSE TO ANSWER 96 DON'T KNOW 88		_____

Thank you for participation.

Mothers of children ages 0-11 months

**MOTHER WITH CHILD AGES 0-11 MONTHS
 RAPID KNOWLEDGE, PRACTICE, & COVERAGE
 (KPC) SURVEY: ARMENIA**

QUESTIONNAIRE IDENTIFICATION	FOR OFFICE USE ONLY RECORD # 3 _____
PVO/NGO _____ SUPERVISION AREA # _____ LQAS # OUT OF 19 __ — SUPERVISION AREA NAME _____	

INTERVIEW DATE ____/____/____ DD/MM/YY INTERVIEWER'S NAME _____ SUPERVISOR'S NAME _____ REGION _____ DISTRICT _____ VILLAGE /LOCATION _____	PRIOR TO THE INTERVIEW, THE NUMBER OF HOUSES VISITED (USE TICKMARKS) A. HOUSES EMPTY _____ _____ B. NO RESPONDENT AT HOUSE _____ C. RESPONDENT DOES NOT AGREE TO INTERVIEW _____ D. RESPONDENT LIVES AT HOUSE BUT MORE THAN 30 MINUTES AWAY _____ E. RETURN APPOINTMENT ____:____ TOTAL _____
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INTRODUCTION AND CONSENT

INFORMED CONSENT

Hello. My name is _____ and I am working with (NAME OF ORGANIZATION). We are conducting a _____ survey about the health of women and children. We would very much appreciate your participation in this survey. I would like to ask you about your health (and the health of your children). This information will help _____ to plan and improve existing health services. The survey usually takes _____ minutes to complete. Whatever information you provide will be kept strictly confidential and will not be shown to other persons.

Participation in this survey is voluntary and you can choose not to answer any individual question or all of the questions. However, we hope that you will participate in this survey since your views are important.

At this time, do you want to ask me anything about the survey?

Signature of interviewer: _____ Date: _____

RESPONDENT AGREES TO BE INTERVIEWED1 RESPONDENT DOES NOT AGREE TO BE INTERVIEWED2 →END
RESPONDENT DOES NOT AGREE TO BE INTERVIEWED2 →END
RESPONDENT DOES NOT AGREE TO BE INTERVIEWED2 →END
RESPONDENT DOES NOT AGREE TO BE INTERVIEWED2 →END
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RESPONDENT DOES NOT AGREE TO BE INTERVIEWED2 →END
RESPONDENT DOES NOT AGREE TO BE INTERVIEWED2 →END
RESPONDENT DOES NOT AGREE TO BE INTERVIEWED2 →END

NAME OF CHILD BETWEEN 0 AND 11 MONTHS _____
[IF CHILD IS 12 MOS. OR OLDER, END]

NAME OF MOTHER _____

BIRTHDATE ___/___/___
DD/MM/YY

BIRTHDATE ___/___/___
DD/MM/YY
AGE OF MOTHER (IN YEARS) _____

[ASK TO SEE IMMUNIZATION CARD TO VERIFY BIRTHDATE.]

ADDRESS _____

AGE OF CHILD (IN MONTHS) _____
[DO NOT CALCULATE AGE IF BIRTHDATE IS KNOWN.]

COMMENTS

SEX OF CHILD (PLEASE CIRCLE): M F

PLEASE CIRCLE THE RESPONDENT'S ANSWERS

SECTION 1: RESPONDENT INFORMATION

To begin I would like to ask you a few questions about your background.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
1	What is the highest level of education you have attained?	NONE..... 1 SOME PRIMARY.....2 PRIMARY.....3 SECONDARY.....4 HIGHER.....5 OTHER _____96 (SPECIFY)		_____
2	What is your religion? IF RESPONSE IS "CHRISTIAN" PROBE: "WHAT IS THE SPECIFIC DENOMINATION?"	GRIGORIAN..... 1 CATHOLIC.....2 PROTESTANT.....3 MOSLEM.....4 NOT RELIGIOUS..... 5 OTHER _____96 (SPECIFY) DON'T KNOW.....88	→ SEC2	_____
3	Does your religion prohibit you to use medications and receive health services? IF YES: Which medications and health services are prohibited? _____	YES.....1 NO.....2		_____

SECTION 2. BREASTFEEDING AND NUTRITION

SECTION 2A: MATERNAL NUTRITION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
1	When you were pregnant with (NAME), did you take any iron tablets?	YES.....1 NO.....2 DON'T KNOW.....88	→ SEC3 → SEC3	_____
2	How many days did you take the tablets? IF ANSWER IS NOT NUMERIC, PROBE FOR APPROXIMATE NUMBER OF DAYS.	# OF DAYS ____ ____ DON'T KNOW.....88		_____

SECTION 3: MATERNAL HEALTH
SECTION 3A: PRENATAL CARE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
1 *N	Did you see anyone for antenatal care while you were pregnant with (NAME)?	YES.....1 NO.....2	→ SEC3B	
2	IF YES: From whom did you receive care? CIRCLE ALL MENTIONED PROBE: "Anyone else?"	GYNECOLOGIST/ OBSTETRICIAN.....1 OTHER DOCTOR.....2 NURSE.....3 MIDWIFE.....4 RELATIVES.....5 NO ONE.....6 OTHER _____ 96 (SPECIFY)		
3	Can you remember how many antenatal visits you had while you were pregnant with (NAME)?	# OF VISITS ____ ____ DON'T REMEMBER.....88	→ SEC3B	
4	When was your first visit? PROBE: "Which month of your pregnancy?"	MONTH OF PREGNANCY ____ ____		
5	Were you given information about family planning during these visits?	YES.....1 NO.....2 DON'T KNOW.....88	→ 6 → 6	
5A	Which methods did the provider tell you about? RECORD ALL METHODS MENTIONED PROBE: "ANY OTHER METHODS?"	NORPLANT.....1 INJECTIONS.....2 PILL.....3 IUD.....4 BARRIER METHOD/ DIAPHRAGM.....5 CONDOM.....6 FOAM/GEL.....7 TUBAL LIGATION.....8 VASECTOMY.....9 LACTATIONAL AMENORRHEA (EXCLUSIVE BREASTFEEDING).....10 RHYTHM.....11 ABSTINENCE.....12 WITHDRAWAL.....13 OTHER _____ 96 (SPECIFY)		
6	Were you told about the signs of pregnancy complications?	YES.....1 NO.....2 DON'T KNOW.....88		

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
7	Were you told where to go if you had pregnancy complications?	YES.....1 NO.....2 DON'T KNOW.....88		

SECTION 3B: DELIVERY AND NEWBORN CARE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
1 *N	Who assisted you with the delivery?	GYNECOLOGIST/ OBSTETRICIAN..... 1 OTHER DOCTOR..... 2 NURSE 3 MIDWIFE..... 4 RELATIVES..... 5 NO ONE..... 6 OTHER _____ 96 (SPECIFY)		
2 *N	Where did you give birth? IF RESPONSE IS HOSPITAL, WRITE THE NAME OF THE PLACE. _____ (NAME OF PLACE)	RESPONDENT'S HOME..... 1 OTHER HOME 2 HEALTH FACILITY / GOV. HOSPITAL..... 3 OTHER _____ 96 (SPECIFY)	→ 5	
3	Can you describe the instrument that was used to cut the cord? IF UNABLE TO DESCRIBE CLEARLY, THEN PROBE . . . "Can you show me an example of the instrument that was used to cut the cord, if possible?"	UNUSED RAZOR BLADE 1 USED RAZOR BLADE 2 SCISSORS..... 3 KNIFE 4 OTHER _____ 96 (SPECIFY) DON'T KNOW..... 88		
4	What was used to treat the cord after birth?	ANTICEPTIC SOLUTION..... 1 OTHER _____ 96 (SPECIFY) DON'T KNOW..... 88		

5	Where was (NAME) put immediately after cutting the cord?	WITH MOTHER..... 1 IN COT..... 2 TAKEN TO BE BATHED..... 3 OTHER _____ 96 (SPECIFY) DON'T KNOW..... 88		
6	After the delivery, did your baby stay in the room with you?	YES 1 NO 2 DON'T KNOW..... 88		
7	How many deliveries have you had in your life?	_____ Deliveries		
8	How many deliveries were by Cesarean Section ?	_____ C-Sections	If 0 skip to SEC3C	
9	Did you have a cesarean section for your most recent delivery?	YES 1 NO 2 DON'T KNOW..... 88		

SECTION 3C: POSTNATAL CARE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
1	After (NAME) was born, did anyone check on your health (either you visited them or they visited you)?	YES 1 NO 2	→ 3	
2	Who checked on your health at that time? PROBE FOR MOST QUALIFIED PERSON.	GYNECOLOGIST/ OBSTETRICIAN..... 1 OTHER DOCTOR..... 2 NURSE 3 MIDWIFE..... 4 NO ONE..... 5 OTHER _____ 96 (SPECIFY)		
2A	Were you given information about breast-feeding during this check?	YES 1 NO 2 DON'T KNOW..... 88		
3	Did a doctor or nurse visit you in your home after the delivery (within one month after delivery)?	YES 1 NO 2 DON'T KNOW..... 88	→ 5	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
4	How many days or weeks after the delivery did the first check take place? RECORD '00' DAYS IF SAME DAY.	DAYS AFTER DELIVERY 1 # OF DAYS ___ ___ WEEKS AFTER DELIVERY 2 # OF WEEKS ___ ___ DID NOT RECEIVE CARE..... 3 DON'T KNOW..... 88		_____
5	Did anyone give you information about family planning after your delivery?	YES 1 NO 2 DON'T KNOW..... 88	→6 →6	_____
5A	Which methods were you told about? RECORD ALL METHODS MENTIONED PROBE: "ANY OTHER METHODS?"	NORPLANT 1 INJECTIONS 2 PILL 3 IUD 4 BARRIER METHOD/ DIAPHRAGM 5 CONDOM 6 FOAM/GEL 7 TUBAL LIGATION 8 VASECTOMY 9 LACTATIONAL AMENORRHEA (EXCLUSIVE BREASTFEEDING) 10 RHYTHM 11 ABSTINENCE 12 WITHDRAWAL 13 OTHER _____ 96 (SPECIFY)		_____
5B	Where did you receive this information?	FRIEND 1 FAMILY/RELATIVE 2 GOV. HOSPITAL 3 POLICLINIC 4 AMBULATORY 5 MEDICAL POINT 6 TRADITIONAL PRACTITIONER 7 TV, RADIO, MASS MEDIA 8 LITERATURE 9 OTHER _____ 96 (SPECIFY)		_____
6	After (NAME) was born did anyone check (NAME)'s health?	YES 1 NO 2 DON'T KNOW..... 88	→ SEC3D → SEC3D	_____

7	Who checked the baby?	PEDIATRIC/ NEONATOLOGIST..... 1 OTHER DOCTOR..... 2 NURSE 3 MIDWIFE..... 4 NO ONE..... 5 OTHER _____ 96 (SPECIFY)		
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SECTION 3D: BREASTFEEDING AND CHILD NUTRITION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
1 *N	Did you ever breastfeed (NAME)?	YES.....1 NO.....2	→6	
2A *N	Are you breastfeeding (NAME) now?	YES.....1 NO.....2	→3	
2B *N	For how long did you breastfeed (NAME)? IF LESS THAN ONE WEEK, RECORD '00' WEEKS. IF LESS THAN ONE MONTH, RECORD '00' MONTHS.	WEEKS.....1 # OF WEEKS ____ ____ MONTHS.....2 # OF MONTHS ____ ____		
3 *N	How long after birth did you first put (NAME) to the breast? IF LESS THAN 1 HOUR, RECORD '00' HOURS. IF LESS THAN 24 HOURS, RECORD HOURS. OTHERWISE, RECORD DAYS.	IMMEDIATELY.....1 HOURS.....2 # OF HOURS ____ ____ DAYS.....3 # OF DAYS ____ ____ DON'T KNOW.....88		
4 *N	Did you give (NAME) the first milk that came from your breast?	YES.....1 NO.....2		
5	At what age did you first give (NAME) any other food or drink other than breastmilk? IF BABY IS STILL GIVING ONLY BREASTMILK, THEN WRITE 'NEVER' IN THE BLANK	# OF MONTHS ____ ____		

6 *N	Now I would like to ask you about the types of foods and/or drinks (NAME) has been given over the past 24 hours.	YES = 1	NO = 2	DON'T KNOW = 88		
A	Have you given (NAME) plain water?					
B	Have you given (NAME) teas or juices?					
C	Have you given (NAME) commercially produced infant formula?					
D	Have you given (NAME) any other milk such as tinned, powdered, or fresh animal milk?					
E	Have you given (NAME) any semisolid or solid foods in addition to breast milk?					
7 *N	What is the best age of a baby for a mother to start giving her child foods or liquids in addition to breast milk? PROBE FOR NUMERIC ANSWER.	EARLIER THAN 4 MONTHS.....1 AT 4 MONTHS.....2 BETWEEN 4 AND 6 MONTHS...3 AT 6 MONTHS.....4 AFTER 6 MONTHS.....5 DON'T KNOW.....88				
8	At what age should a mother stop breastfeeding her child altogether? PROBE FOR A NUMERIC ANSWER.	EARLIER THAN 24 MONTHS....1 AT 24 MONTHS.....2 AFTER 24 MONTHS.....3 DON'T KNOW.....88				

SECTION 4: FAMILY PLANNING

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	CODE
1A	When did you give birth to (NAME)? (SEE PAGE 2 AND CHECK DATE)	__/__/__ DD/MM/YY		
1B	Were you ever pregnant before (NAME)?	YES.....1 NO.....2	→2	
1C	How many deliveries did you have, including (NAME)?	# OF DELIVERIES ____		
1D	How many living children do you have, including (NAME)?	# OF CHILDREN ____		
1E	When did you give birth to the child before (NAME)?	__/__/__ DD/MM/YY		

2 *N	Was your most recent pregnancy planned?	YES 1 NO 2		
3	Are you currently pregnant?	YES 1 NO 2 UNSURE 3	→END	
4 *N	Are you currently doing something or using any method to delay or avoid getting pregnant?	YES 1 NO 2	→6	
5 *N	What is the main method you or your spouse/partner are using now to avoid/postpone getting pregnant? ONE ANSWER ONLY	NORPLANT 1 INJECTIONS 2 PILL 3 IUD 4 BARRIER METHOD/ DIAPHRAGM 5 CONDOM 6 FOAM/GEL 7 TUBAL LIGATION 8 VASECTOMY 9 LACTATIONAL AMENORRHEA (EXCLUSIVE BREASTFEEDING) 10 RHYTHM 11 ABSTINENCE 12 WITHDRAWAL 13 OTHER _____ 96 (SPECIFY)		
6	Are you intending to have another child in the future?	YES 1 NO 2 DON'T KNOW 88	→END	
7	How long would you like to wait before the birth of the next child? PROBE FOR NUMERIC ANSWER	# of years ____ ____ DO NOT WANT MORE CHILDREN 96 DO NOT KNOW 88		

Thank you very much, I wish you and your baby good health.